PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further andicated unless correcte maintenance fee notificat	d below or directed oth	g the Patent, advance or erwise in Block I, by (a	specifying a new corresp	onuence address, a	itwoi (b) intuicating a sept	correspondence address as trate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
21839 7590 04/04/2008 Cartificate of Mailing or Transmission							
POST OFFICE I	INGERSOLL & I 30X 1404 . VA 22313-1404	ROONEY PC	I here State addre trans	eby certify that this s Postal Service with essed to the Mail S mitted to the USPTO	Fee(s) Transmittal is being in sufficient postage for fire stop ISSUE FEE address (571) 273-2885, on the d	g deposited with the United st class mail in an envelope above, or being facsimile ate indicated below.	
						(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	- A	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/544,718	04/06/2000		Eduardo Cue		P2513/561	9145	
FITLE OF INVENTION: VIRTUAL BUNDLES							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$0	\$0	\$1440	07/07/2008	
EXAM	INER .	ART UNIT	CLASS-SUBCLASS		•		
ZURITA, JAMES H 3625			705-026000	DIAMAN THEREOUT			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. BUCHANAN INGERSOLL 2 2 3				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
APPLE INC.			CUPERTINO, CALIFORNIA				
Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governmen							
4a. The following fee(s) X Issue Fee	are submitted:	41	b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02400 (enclose an extra copy of this form)				
5. Change in Entity Status (from status indicated above) \[\begin{align*} \text{a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \] \[\begin{align*} \text{b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).} \]							
NOTE: The Issue Fee ar	d Publication Fee (if req	uired) will not be accepte ates Patent and Trademark				the assignce or other party in	
Authorized Signature	Of The	1 Sm		Date	July 2, 2008		
Typed or printed name James A. LaBarre				Registration No	o. <u>28632</u>		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							